



Docket No.: P-9126.00

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Mark A. Christopherson et al. Docket: P-9126.00
Serial No.: 09/776,265 Group Art: 3736
Filed: February 2, 2001 Examiner: Unknown
Title: INFORMATION REMOTE MONITOR (IRM) MEDICAL DEVICE

Commissioner of Patents and Trademarks
U.S. Patent and Trademark Office
Washington, D.C. 20231

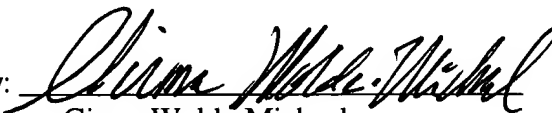
Dear Sir:

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

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The enclosed patents are cited as potentially pertinent to examination of the above application. The attorney for applicants certifies according to CFR §1.97(e) that each item of information contained in this Supplemental Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign patent application not more than three months prior to filing of the Statement.

Respectfully submitted,

By: 

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INFORMATION DISCLOSURE STATEMENT TRANSMITTAL

In re Application of: Mark A. Christopherson et al.
For: INFORMATION REMOTE MONITOR (IRM) MEDICAL DEVICE
Serial No.: 09/776,265
Filed: February 2, 2001



CERTIFICATE OF MAILING UNDER 37 CFR 1.8: I hereby certify that this INFORMATION DISCLOSURE STATEMENT and the paper(s), as described herein, are being deposited in the U.S. Postal Service, as first class mail, addressed to the Commissioner of Patents and Trademarks, Washington, D.C. 20231 on this 30th day of August, 2001.

Signature
Sue McCoy
Printed Name

Commissioner of Patents
Washington, D.C. 20231

Sir:

We are transmitting herewith the attached:

- X Supplemental Information Disclosure Statement
- X PTO FORM 1449
- X Copies cited references
- X Return Postcard

FEE CALCULATION

- ☐ \$ 00.00 Pursuant to 37 CFR §1.97(b)
- ☐ \$ 00.00 Pursuant to 37 CFR §1.97(c) with Certification
- ☒ \$ 00.00 Pursuant to 37 CFR §1.97(e) with Certification
- ☐ \$180.00 Pursuant to 37 CFR §1.97(c) without Certification
- ☐ \$180.00 Pursuant to 37 CFR §1.97(d) with Certification

- ☐ Applicant hereby petitions for a _____ months' extension of time. If an additional extension of time is required, please consider this petition therefor.
- X Applicant believes that no extension of time is required. However, if an extension of time is required, please consider this a petition therefor to provide for the possibility that applicant has inadvertently overlooked the need for an extension of time.
- X Please charge any additional fees or credits to Deposit Account No. 13-2546 which may have been overlooked with regard to this filing. A duplicate of this transmittal is enclosed.

Date

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